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3M INNOVA PO BOX 33427 ST. PAUL, MN		ES COMPANY	I he State addr tran:	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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01 FC:1504	300.00 DA	3 10655328		Judy & Har	ixen!	(Signature)	
02 FC:1501 03 FC:6001	1510.00 DA 3.00 DA		<u></u>	January 8,	2009	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/655,328 09/04/2003			Josef A. Graessle		58975US002	6102	
TILE OF INVENTION	N: BIOLOGICAL GROW	IN PLATE SCANNER	WITH AUTOMATED IN	ARE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/08/2009	
EXAMINER ART UNIT		CLASS-SUBCLASS					
TABATABAI, ABOLFAZL 2624		2624	382-133000		Michae	el G. William	
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Michael G. William  2  3  3				
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	lless an assignee is ident th in 37 CFR 3.11. Comp GNEE tive Proper	ified below, no assignee oletion of this form is NO ties Company	(B) RESIDENCE: (CITY	atent. If an assignee is it assignment. and STATE OR COUNT I, Minnesota	TRY)	cument has been filed for	
a. The following fee(s)  Issue Fee  Publication Fee (I)  Advance Order	No small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3.723 (enclose an extra copy of this form).				
a. Applicant claim	atus (from status indicate	is. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL EN	TITY status. See 37 CF		
nterest as shown by the	records of the United Sta	tes Patent and Trademark		ne applicant, a registered	attorney or agent; or the	assignee of other party in	
Authorized Signature	Michael S	. Wili-		Date Janua	ary 8, 2009	<u> </u>	
Typed or printed name	ne <u>Michael</u>	G. Williams	<del></del>	Registration No	61,990		
in application. Confiden	itiality is governed by 35	U.S.C. 122 and 37 CFR	on is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office	imated to take 12 minutes	s to complete, including	by the USPTO to process) g gathering, preparing, and the you require to complete riment of Commerce, P.O.	

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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 32692 7590 10/08/2008 Certificate of Mailing or Transmission 3M INNOVATIVE PROPERTIES COMPANY I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. PO BOX 33427 ST. PAUL, MN 55133-3427 Judy Hansen (Depositor's name) (Signature (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/655,328 09/04/2003 Josef A. Graessle 6102 TITLE OF INVENTION: BIOLOGICAL GROWTH PLATE SCANNER WITH AUTOMATED INTAKE PREV. PAID ISSUE FEE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE TOTAL FEE(S) DUE DATE DUE \$1510 \$0 nonprovisional NO \$300 \$1810 01/08/2009 **EXAMINER** ART UNIT CLASS-SUBCLASS TABATABAI, ABOLFAZL 2624 382-133000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Michael Williams 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE 3M Innovative Properties Company St. Paul, Minnesota, U.S.A. Please check the appropriate assignee category or categorie (will not be printed on the patent): 🔲 Individual & Corporation or other private group entity 🚨 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3723 (enclose an extra copy of this form). Advance Order - # of Copies \_\_\_\_] 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Authorized Signature Mucha January 8, 2009 Michael G. Williams Registration No. \_\_61,990 Typed or printed name \_ This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Paterland Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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